

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO. **10794896**

FILING DATE **3-15-06**

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2						
3						
4						
5						
6	1					
7						
8						
9						
10						
11	1					
12						
13						
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50						
TOTAL IND.	3					
TOTAL DEP.	13					
TOTAL CLAIMS	16					

	IND	DEP	IND	DEP	IND	DEP
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TOTAL DEP.						
TOTAL CLAIMS						